Entry Blank—Please Type or Print

☐ Mr./Artist _	Dedo	rega	(last name last)
Permanent Address	1220 W	6th St. 4601	Cherebud
	Street		. 77. 7
441	13	Daytime Tel. ()	6) + +1. +66
Zip		are	a
Temporary or Studio Address			
		Street	City
		Daytime Tel. ()
Zip		are	a
	esently live in on a county were you	e of the counties of the V u born?	Vestern
Collaborator (if a	iny)		
Artist will pic Museum sho	k up at Museum uld dispose of.	pted or are not sold: at artist's expense:	
	Street		
City	Stat	te	Zip

Special Instructions

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until May 27, 1990.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature Both Spanning

I have received the unsold/unaccepted object(s) in good condition.

Signature

Detach entire portion along dotted line and submit with slides, but retain tags

Entry Blanks

A Pair				tograph (specify	y category)		
Materials used (medi	(a):		,				
Silv	er print	ig-0	ut p	ape			
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GRAPHICS AND PHOTOGRAPHY ONLY							
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X	7	, ,			1		
NOT ACCEPTED				NOT ACCEPTED			
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B Paintings Graphics Photography (specify category) Materials used (media):							
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